Fill	in this inform	ation to identify your				
Deb	otor 1	Daniel Lawrence First Name	Castillo Middle Name	Last Name		
Deb	otor 2	i iist ivaine	Widdle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ban	kruptcy Court for the:	MIDDLE DISTRICT OF I	FLORIDA		
Cas	se number 8	:18-bk-01224				
	own)				_	eck if this is an ended filing
					ann	enaea ming
Ot∙	ficial For	m 106Cum				
		m 106Sum	and Liabilities an	d Certain Statistical Information	an .	40/45
				are filing together, both are equally responsit		12/15
info	rmation. Fill o	ut all of your schedule	es first; then complete th	e information on this form. If you are filing am		
youi	original form	is, you must fill out a	new <i>Summary</i> and check	the box at the top of this page.		
Par	t 1: Summa	rize Your Assets				
						rassets
					Valu	e of what you own
1.	Schedule A/ 1a. Copy line	B: Property (Official For 55, Total real estate, for	orm 106A/B) rom Schedule A/B		\$_	50,000.00
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B		\$ _	45,542.00
	1c. Copy line	63, Total of all property	y on Schedule A/B		\$ _	95,542.00
Par	t 2: Summa	rize Your Liabilities				
					You	r liabilities
						unt you owe
2.	Schedule D:	Creditors Who Have C	laims Secured by Property	(Official Form 106D)		45.000.00
	2a. Copy the	total you listed in Colu	mn A, <i>Amount of claim,</i> at t	he bottom of the last page of Part 1 of Schedule	D \$ _	15,800.00
3.			Unsecured Claims (Official		¢	0.00
	3a. Copy the	total claims from Part	1 (priority unsecured claim:	s) from line 6e of Schedule E/F	\$ _	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F	\$ _	250,000.00
				Your total liabili	ities \$	265,800.00
				i our total nasin		200,000.00
Par	t 3: Summa	rize Your Income and	Expenses			
4.		Your Income (Official Formbined monthly incom		I	\$ _	5,000.00
5.		Your Expenses (Official onthly expenses from li			\$_	3,992.00
Par	t 4: Answer	These Questions for	Administrative and Statis	stical Records		
6.	-	•	er Chapters 7, 11, or 13? on this part of the form. Ch	neck this box and submit this form to the court wit	th your other	schedules.
7	Yes	f debt do vou have?				

- - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 8:18-bk-01224-CPM Doc 18 Filed 03/08/18 Page 2 of 43

Debtor 1 Daniel Lawrence Castillo Case number (if known) 8:18-bk-01224

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$

\$				_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Case 8:18-0	OK-01224-0	СРМ	DOC 18	Filed 03	3/08/18	s Pag	e 3 of 43			
Fill in this infor	rmation to identify your c	case and this f	iling:								
Debtor 1	Daniel Lawrence C										
Debtor 2	First Name	Middle Nan	ne	Las	t Name						
(Spouse, if filing)	First Name	Middle Nan	ne	Las	t Name						
United States Ba	ankruptcy Court for the:	MIDDLE DISTI	RICT OF F	FLORIDA							
Case number	8:18-bk-01224									Check if this is an amended filing	
Official Fo	orm 106A/B										
_	le A/B: Prope	ertv								12/15	
n each category,	separately list and describe Be as complete and accurate	items. List an a								ategory where you	
Answer every que	re space is needed, attach a estion. e Each Residence, Building,	•		·	-		write your	name and case	e nun	iber (it known).	
	have any legal or equitable										
No. Go to Pa		interest in any i	esiderice, i	bullullig, lanc	i, or similar pro	perty:					
_	is the property?										
- res. where	is the property?										
1.1	5	V	Vhat is the	property? Ch	eck all that apply						
	Boulevard s, if available, or other description			e-family home				deduct secured claims or exemptions. Put bunt of any secured claims on Schedule D:			
			_	ex or multi-uni Iominium or co	_		Creditors \	litors Who Have Claims Secured by Property			
			_	ufactured or m	obile home						
Tampa	FL 3360	03-0000	Land				Current va entire pro	alue of the perty?		rrent value of the rtion you own?	
City	State ZI	IP Code	_	tment propert	у		\$	50,000.00		\$50,000.00	
			■ Other	share _r Busine	ess building					wnership interest by the entireties, or	
		V	Vho has an	interest in th	ne property? Ch	eck one	a life esta	te), if known.	апсу	by the entheties, or	
Hillsboro	uuah		_	or 1 only			Fee sim	ple			
County	rugii		_	or 2 only or 1 and Debto	or 2 only						
			_		debtors and ano	ther		k if this is com structions)	muni	ity property	
				mation you w entification n	ish to add abou umber:	ıt this item	, such as lo	ocal			
	llar value of the portion y have attached for Part 1.									\$50,000.00	
Part 2: Describe	Your Vehicles										

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Cars, vans, No Yes Make:	trucks, tractors, sport utility ve	hicles, motorcycles		
No Ves Make:	, , , ,	,		
Yes Make:				
1 Make:				
	Chayralat		Do not deduct secured of	claims or exemptions. Put
Model.	Chevrolet	Who has an interest in the property? Check one	the amount of any secur	ed claims on Schedule D:
	Suburban	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
Year:	2003 nate mileage: 225000	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	formation:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property:	portion you own?
		At least one of the deptors and another		
		☐ Check if this is community property (see instructions)	\$1,000.00	\$1,000.00
2 Make:	Toyota	Who has an interest in the property? Check one		claims or exemptions. Put
Model:	Camry	■ Debtor 1 only		ed claims on Schedule D: nims Secured by Property.
Year:	2016	Debtor 2 only		
	nate mileage: 7000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other in	ormation:	☐ At least one of the debtors and another		
		_	\$4E 000 00	*45.000.00
		☐ Check if this is community property (see instructions)	\$15,000.00	\$15,000.00
No Yes				
Yes Add the do		rn for all of your entries from Part 2, including a		\$16,000.00
Yes Add the do		rn for all of your entries from Part 2, including a that number here		\$16,000.00
Add the dopages you	have attached for Part 2. Write be Your Personal and Household It	ems		<u> </u>
Add the dopages you	have attached for Part 2. Write be Your Personal and Household It	that number here		Current value of the portion you own? Do not deduct secured
Add the dopages you 13: Descri you own of Household Examples:	have attached for Part 2. Write be Your Personal and Household It or have any legal or equitable in goods and furnishings Major appliances, furniture, linens	ems terest in any of the following items?		Current value of the portion you own?
Add the dopages you t3: Descri you own o	have attached for Part 2. Write be Your Personal and Household It or have any legal or equitable in goods and furnishings Major appliances, furniture, linens	ems terest in any of the following items?		Current value of the portion you own? Do not deduct secured
Add the dopages you 13: Descri you own of Household Examples:	have attached for Part 2. Write be Your Personal and Household It or have any legal or equitable in goods and furnishings Major appliances, furniture, linens	ems terest in any of the following items? , china, kitchenware		Current value of the portion you own? Do not deduct secured claims or exemptions.
Add the dopages you ta: Descriyou own of the dopages you will be the dopages you will be the dopages you own of the dopages you own of the dopages you will be the dopages you	have attached for Part 2. Write be Your Personal and Household It or have any legal or equitable in goods and furnishings Major appliances, furniture, linens scribe Household furn Televisions and radios; audio, vide including cell phones, cameras, m	ems terest in any of the following items? , china, kitchenware ishings eo, stereo, and digital equipment; computers, printe		Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B

☐ Yes. Describe.....

D	ebtor 1	Daniel Lawre	ence Ca	stillo		Case number (if known)	8:18-bk-01224
9.		nent for sports a				lan melforbly and the second	
	■ No	nusical instru		exercise, and other r	nobby equipment; bicycles, pool tabl	es, golf clubs, skis; canoes	and kayaks; carpentry tools;
	☐ Yes.	Describe					
10	■ No	ples: Pistols, rifle	s, shotgur	ns, ammunition, and	related equipment		
	⊔ Yes.	Describe					
11	. Clothe Examµ □ No		othes, fur	s, leather coats, des	igner wear, shoes, accessories		
	Yes.	Describe					
			Weari	ng apparel			\$5,000.00
12	■ No	<i>ples:</i> Everyday je	welry, cos	stume jewelry, engaç	gement rings, wedding rings, heirloo	m jewelry, watches, gems, ç	gold, silver
	☐ Yes.	Describe					
13	Exam _i ■ No	arm animals ples: Dogs, cats,	birds, hor	rses			
	☐ Yes.	Describe					
14	■ No	ther personal an Give specific inf			not already list, including any hea	alth aids you did not list	
		оло оросии ии					
15					art 3, including any entries for pa	ges you have attached	\$9,000.00
Pa	art 4: De	escribe Your Finan	cial Asset	s			
					any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16	□ No			•	me, in a safe deposit box, and on ha	and when you file your petiti	on
						Cash	\$325.00
17					ounts; certificates of deposit; shares with the same institution, list each.	in credit unions, brokerage	nouses, and other similar
	□ No ■ Yes		,		Institution name:		
			17.1.	Checking	Regions Bank		\$200.00
			17.2.	Checking	Wells Fargo Bank		\$17.00

Official Form 106A/B
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Case 8:18-bk-01224-CPM Doc 18 Filed 03/08/18 Page 6 of 43

De	ebtor 1	Daniel La	wrence Castillo				Case number (if know	vn)	8:18-bk-01224
	Exam		ls, or publicly traded sto ds, investment accounts v		ge firms, money ma	arket accounts			
	■ No		Institution or i	issuer name	j.				
19.	joint v	ublicly traded venture	I stock and interests in i	incorporate	d and unincorpora	ated businesse	es, including an inter	rest	in an LLC, partnership, and
	■ No	Civo aposifia	information about them						
	Lites.	. Give specific	Name of entity:				% of ownership:		
	Negot	tiable instrume	orporate bonds and othe ents include personal check ruments are those you can	ks, cashiers	d' checks, promisso	ry notes, and me	oney orders.		
	☐ Yes.	Give specific	information about them Issuer name:						
21	Retire	ment or pens	ion accounts						
			in IRA, ERISA, Keogh, 40	01(k), 403(b)), thrift savings acco	ounts, or other p	ension or profit-sharii	ng p	lans
	☐ Yes.	List each acc	ount separately. Type of account:		Institution name:				
	Your s Exam	share of all un	nd prepayments used deposits you have m ents with landlords, prepaid					panio	es, or others
	■ No □ Yes.				Institution name	or individual:			
23.	Annuit	ties (A contrad	ct for a periodic payment o	of money to y	you, either for life o	r for a number c	of years)		
	■ No		Issuer name and descrip	ation					
	⊔ Yes.		issuel fiame and descrip	olion.					
			ation IRA, in an account 1), 529A(b), and 529(b)(1)		ed ABLE program	n, or under a qu	alified state tuition _l	prog	gram.
			Institution name and des	scription. Sep	parately file the rec	ords of any inter	rests.11 U.S.C. § 521	(c):	
25.	Trusts	s, equitable or	future interests in prop	erty (other	than anything list	ed in line 1), an	nd rights or powers e	exer	cisable for your benefit
	☐ Yes.	Give specific	information about them						
	Exam		s, trademarks, trade secre domain names, websites, μ		•		ents		
	■ No □ Yes.	. Give specific	information about them						
27.			es, and other general inta permits, exclusive licenses		ve association hold	lings, liquor licer	nses, professional lice	∍nse	s
		Give specific	information about them						
Me	oney or	property owe	ed to you?						Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed t	o you						
	_	Give specific	information about them, in	ncluding whe	ether you already fil	led the returns a	and the tax years		

Official Form 106A/B Schedule A/B: Property page 4

Del	otor 1	Daniel Lawrence Castillo		Case number (if known)	8:18-bk-01224
_		support oles: Past due or lump sum alimony, spousal support,	child support, maintenance, div	vorce settlement, property	settlement
		Give specific information			
[<i>Exam</i> µ ⊐ No	amounts someone owes you oles: Unpaid wages, disability insurance payments, di benefits; unpaid loans you made to someone els Give specific information		ion pay, workers' comper	nsation, Social Security
		Business Income)		\$20,000.00
ı	<i>Exam</i> µ ■ No	ets in insurance policies bles: Health, disability, or life insurance; health saving	, ,	wner's, or renter's insurar	ice
L	⊒ Yes.	Name the insurance company of each policy and list Company name:	its value. Benefic	siary:	Surrender or refund value:
ļ	If you a some of	terest in property that is due you from someone ware the beneficiary of a living trust, expect proceeds from has died. Give specific information		re currently entitled to rece	eive property because
į	<i>Exam</i> µ ■ No	against third parties, whether or not you have file of es: Accidents, employment disputes, insurance clair Describe each claim		d for payment	
ı	No	contingent and unliquidated claims of every natur Describe each claim	e, including counterclaims of	the debtor and rights to	set off claims
I	No	Give specific information			
36.		the dollar value of all of your entries from Part 4, in art 4. Write that number here		s you have attached	\$20,542.00
Par	t 5: De	scribe Any Business-Related Property You Own or Have	an Interest In. List any real estate	in Part 1.	
•	No. Go	own or have any legal or equitable interest in any busine to Part 6. So to line 38.	ss-related property?		
Par		scribe Any Farm- and Commercial Fishing-Related Prope ou own or have an interest in farmland, list it in Part 1.	erty You Own or Have an Interest I	ln.	
46.	No.	own or have any legal or equitable interest in any Go to Part 7. Go to line 47.	y farm- or commercial fishing	-related property?	

Official Form 106A/B Schedule A/B: Property page 5

Describe All Property You Own or Have an Interest in That You Did Not List Above

Part 7:

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Dep	Daniel Lawrence Castillo		Case number (if known)	8:18-bk-01224
_	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No	?		
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$50,000.00
56.	Part 2: Total vehicles, line 5	\$16,000.00		
57.	Part 3: Total personal and household items, line 15	\$9,000.00		
58.	Part 4: Total financial assets, line 36	\$20,542.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$45,542.00	Copy personal property t	otal \$45,542.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$95,542.00

Official Form 106A/B Schedule A/B: Property page 6

						•				
H	ll in this info	ormation to identify your	case:							
De	ebtor 1	Daniel Lawrence First Name	Castillo Middle Name	L	ast Name					
	ebtor 2									
	oouse if, filing)	First Name	Middle Name		ast Name					
Ur	nited States	Bankruptcy Court for the:	MIDDLE DISTRICT OF FLO	RIDA						
	ase number known)	8:18-bk-01224				☐ Check if this is an amended filing				
0	fficial F	orm 106C								
			operty You Cla	im	as Exempt	4/16				
the nee	property yo	u listed on <i>Schedule A/B: F</i> and attach to this page as i	Property (Official Form 106A/B)	as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and				
spe any fun exe	ecific dollar y applicable ids—may be emption to a	amount as exempt. Alter e statutory limit. Some exe e unlimited in dollar amou	natively, you may claim the femptions—such as those for unt. However, if you claim an	ull fai heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement				
Pa	art 1: Ide	ntify the Property You Cla	im as Exempt							
1.	Which set	of exemptions are you cl	aiming? Check one only, eve	n if yo	our spouse is filing with you.					
	■ You are	claiming state and federal	nonbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	_	_			0 - (-/(-/					
2.		☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief descr	iption of the property and line	e on Current value of the		ount of the exemption you claim	Specific laws that allow exemption				
	Schedule A	√B that lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	2003 Che	evrolet Suburban 22500	\$1,000.00		\$1,000.00	Fla. Stat. Ann. § 222.25(1)				
		Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
		rota Camry 7000 miles	\$15,000.00		\$0.00	Fla. Stat. Ann. § 222.25(1)				
	Line from .	Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit					
		old furnishings	\$3,000.00		\$1,000.00	Fla. Const. art. X, § 4(a)(2)				
	Line from (Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
3.	(Subject to ■ No	adjustment on 4/01/19 and	, ,	ises fi	led on or after the date of adjustmen	,				

Official Form 106C

Yes

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	0000 0120	5K 01224 OF W 200	10 1 1100	00/00/10 1 0	.go _c	
Fill in this informa	tion to identify you	r case:				
Debtor 1	Daniel Lawrence	e Castillo				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the:	MIDDLE DISTRICT OF FLORI	IDA			
Case number 8:	18-bk-01224					
(if known)	10-DK-01224				☐ Check	t if this is an
<u> </u>					_	ded filing
Official Form	106D					
Schedule D): Creditors	Who Have Claims	Secured	by Property	y	12/15
		f two married people are filing togetl out, number the entries, and attach it				
1. Do any creditors ha	ave claims secured by	your property?				
□ No. Check the property of the property o	nis box and submit th	nis form to the court with your othe	r schedules. Yo	u have nothing else to	o report on this form.	
Yes. Fill in a	II of the information b	pelow.				
Part 1: List All	Secured Claims					
		nore than one secured claim. list the cre	editor separately	Column A	Column B	Column C
for each claim. If more	e than one creditor has	a particular claim, list the other creditor cal order according to the creditor's nan	rs in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Wells Fargo)	Describe the property that secures	the claim:	\$15,800.00	\$15,000.00	\$0.00
Creditor's Name		2016 Toyota Camry 7000 m	iles	<u> </u>		
PO Box 196	557	As of the date you file, the claim is:	Check all that			
Irvine, CA 9	-	apply. ☐ Contingent				
	ity, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or secu	ıred		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
At least one of the		☐ Judgment lien from a lawsuit				
Check if this clair community debt		Other (including a right to offset)	Auto Ioan			
Date debt was incurr	red	Last 4 digits of account num	nber 4372			
Add the dollar value	e of your entries in Co	olumn A on this page. Write that nun	nber here:	\$15,80	0.00	
	age of your form, add	the dollar value totals from all pages		\$15,80		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Debtor 1		Case 0.10-b	CO1224-CFW DUC 10 THEO 03/	00/10 Fage 11 01 43	
Debtor 2 Spouse f, lling First Name	Fill i	n this information to identify your o	ase:		
Debtor 2 Spouse f, lling First Name	Debt	or 1 Daniel Lawrence	astillo		
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA Case number St.18-bk-01224	2021				
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA Case number 8:18-bk-01224 (# known)	Debt	or 2			
Case number 8:18-bk-01224 (if troom) Check if this is an amended filing Check if this is an amended filing Check if this is an amended and incher Check if this is an amended filing and incher Check if this is an amended filing and incher Check if this is a manufactor of the amended filing and incher Check if this is a manufactor and another Check if this is a manufactor and another Check if this is a for a community Check if this is a for a community Check if	(Spous	se if, filing) First Name	Middle Name Last Name		
Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party it any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule 61. Eventury Contracts and Unexpired Leases (Official Form 1060.) Do not include any creditors with partially secured claims. List the other party it any executory contracts and Unexpired Leases (Official Form 1060.) Do not include any creditors with partially secured claims. List the other party it any executory contracts and Unexpired Leases (Official Form 1060.) Do not include any creditors with partially secured claims. List the other party it any executory contracts and Unexpired Leases (Official Form 1060.) Do not include any creditors when a related in the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2: Yes. 4. List all of Your NONPRIORITY Unsecured Claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claims, list the order or separately for each claim. For each claim listed, identify what type of claim it. Do not list claims already included in Part 1. If more than one erotific troids a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. List all of your nonpriority unsecured claims is the other creditors in Part 3. If you have more than	Unite	ed States Bankruptcy Court for the:	MIDDLE DISTRICT OF FLORIDA		
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□ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts			<u> </u>		
□ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		•	•		
debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims No			По		
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts			unity		
■ No Debts to pension or profit-sharing plans, and other similar debts				greement or divorce that you did not	
				and other similar debts	
		□ Yes	Other Specify		

Internal Revenue Service	Last 4 digits of ac	count number			\$250,0
Nonpriority Creditor's Name					
PO Box 7346	When was the del	bt incurred?			
Philadelphia, PA 19101	_				
Number Street City State Zlp Code	As of the date you	u file, the claim is: Ch	neck all that apply		
Who incurred the debt? Check one.					
Debtor 1 only	Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	Disputed				
☐ At least one of the debtors and another	Type of NONPRIO	RITY unsecured clai	m:		
☐ Check if this claim is for a community	☐ Student loans				
debt			n agreement or divorce	e that you did not	
Is the claim subject to offset?	report as priority cla				
No	■ Debts to pension	on or profit-sharing pla	ns, and other similar d	ebts	
	_	Income tax			
Yes	Other. Specify	Disputed			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total				-	
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ ——	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	φ	
	ou.	Other. Add all other priority dissectived claims. Write that amount here.	ou.	Ф	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	 \$	250,000.00
		here.		Ψ	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	250,000.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this inform	mation to identify your	case:		
Debtor 1	Daniel Lawrence	Castillo		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA	
Case number	8:18-bk-01224			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Otato	Zii Oode	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4			<u> </u>	2 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

Case 8:18-bk-01224-CPM Doc 18 Filed 03/08/18 Page 14 of 43

				ŭ	_
Fill in this	information to identify your	case:			
Debtor 1	Daniel Lawrence	Castillo			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case num	ber 8:18-bk-01224				
(if known)	0.10 BR 01224				☐ Check if this is an
					amended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	lebtors			12/15
fill it out, a your name		e boxes on the left. Attack). Answer every question	h the Additional Page t n.	o this page. On the to	needed, copy the Additional Page, op of any Additional Pages, write
■ No	s				
Arizor	hin the last 8 years, have yo ia, California, Idaho, Louisiana Go to line 3. S. Did your spouse, former spo	ı, Nevada, New Mexico, Pu	uerto Rico, Texas, Wash		ty states and territories include)
in line Form out C	2 again as a codebtor only	if that person is a guarar	ntor or cosigner. Make	sure you have listed ()6G). Use Schedule D	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill reditor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedu	
3.1				☐ Schedule D, lii	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, li	ne
-	Number Street City	State	ZIP Code	_	
3.2				Cabadula D III	
3.2	Name			_ □ Schedule D, liı □ Schedule E/F,	· · · · · · · · · · · · · · · · · · ·
				☐ Schedule G, li	
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information to identify your o	case:								
Del	otor 1 Daniel Law	rence Castillo								
1	otor 2 puse, if filing)				_					
Uni	ted States Bankruptcy Court for the	e: MIDDLE DISTRICT C	F FLORIDA							
Cas	se number 8:18-bk-01224					Che	ck if this is	:		
(If kr	nown)		-			1	An amend	J		
									ng postpetition following date:	
0	fficial Form 106I					i	MM / DD/ `	YYYY	· ·	
S	chedule I: Your Inc	ome					VIIVI 7 DD7			12/1
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. 11.1: Describe Employment	ur spouse is not filing w On the top of any additi	ith you, do not inclu	de infor	mat	ion abou	ıt your sp	ouse. If m	ore space is	needed,
	Fill in your employment									
1.	information.		Debtor 1				Debtor	2 or non-f	iling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed				☐ Emp	loyed		
			□ Not employed				☐ Not e	employed		
		Occupation	Attorney							
	Include part-time, seasonal, or self-employed work.	Employer's name	Self							
	Occupation may include student or homemaker, if it applies.	Employer's address	3900 No Boulev Tampa, FL 3360							
		How long employed t	here? <u>26 yrs</u>				_			
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	date you file this form. If	you have nothing to re	eport for	any	line, writ	e \$0 in the	e space. In	clude your no	n-filing
•	u or your non-filing spouse have me space, attach a separate sheet to		ombine the informatio	n for all e	emp	loyers fo	r that pers	on on the I	ines below. If	you need
						For De	ebtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1	0,000.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	·	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ine 2 + line 3.		4.	\$	10,0	00.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Daniel Lawrence Castillo	-	C	ase	number (if known)	8:18-	bk-012	224	
	0	ve Pero Albana	4			Debtor 1	non-	Debtor filing s	pouse	
	Cop	by line 4 here	4.		\$_	10,000.00	\$		N/A	<u>\</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	à.	\$	2,000.00	\$		N/A	\
	5b.	Mandatory contributions for retirement plans	5b).	\$	0.00	\$		N/A	<u>\</u>
	5c.	Voluntary contributions for retirement plans	5c		\$_	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$_	0.00	\$		N/A	
	5e.	Insurance	5e		\$	0.00	\$		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f. 5g		\$ \$	3,000.00	\$		N/A N/A	_
	5h.	Other deductions. Specify:			\$ -	0.00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		· — \$	5,000.00	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		· \$	5,000.00	\$		N/A	_
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				·	· —			_
	8b.	monthly net income. Interest and dividends	8a 8b		\$_ \$	0.00	\$		N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce			_		· 			_
	8d.	settlement, and property settlement. Unemployment compensation	8d 8d		\$_ \$	0.00	\$ \$		N/A N/A	
	8e.	Social Security	8e		\$ —	0.00	\$ 		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.00	\$		N/A	<u> </u>
	8g.	Pension or retirement income	89		\$_	0.00			N/A	_
	8h.	Other monthly income. Specify:	_ 8n	ո.+ —	\$	0.00	+ 5		N/A	<u>`</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	i	0.00	\$		N/	Α
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		5,000.00 + \$		N/A	= \$	5,000.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-					-	0,000.00
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe			•		chedule 11.	_	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies						12.	\$	5,000.00
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						Combi month	ined Ily income
		Voc Evolain:								

FIII	in this informa	tion to identify yo	our case:			I		
Deb		Daniel Lawre		tillo		Che	eck if this is:	
Dah	tor 2			·····			An amended filing	
	ouse, if filing)							wing postpetition chapter fithe following date:
Unit	ed States Bankr	uptcy Court for the	: MIDDLE	E DISTRICT OF FLORIDA	<u> </u>		MM / DD / YYYY	
	e number 8:	18-bk-01224						
Of	fficial Fo	rm 106J						
		J: Your	Exper	ises				12/1
Be info	as complete a	and accurate as	possible.	. If two married people a ch another sheet to this				
Par		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to	= -	in a separ	ate household?				
	_ 100. 200		a copa					
			st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.					_	_ □ Yes □ No
								☐ Yes
								□ No
								Yes
								□ No □ Yes
3.	Do your exp	enses include	_	No				_ Li res
	•	f people other t d your depende	han $_{m \Box}$	Yes				
Par Est		ate Your Ongoi		y Expenses uptcy filing date unless y	ou are using this f	orm as a s	supplement in a Ch	apter 13 case to report
exp								of the form and fill in the
Incl	ude expense	s paid for with	non-cash	government assistance i	f you know			
	ficial Form 10		u 11410 1110				Your exp	penses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgag	je 4.	\$	2,200.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's	s, or renter	's insurance		4b.	·	0.00
				ipkeep expenses		4c.	·	400.00
5.		owner's associat		dominium dues our residence, such as ho	ime equity loans	4d. 5.	·	0.00 0.00
J.	Auditional	igage payili	critis for yo	on residence, such as no	and equity loans	5.	Ψ	0.00

Deb	tor 1 Daniel Lawrence Castillo	Case num	ber (if known)	8:18-bk-01224
6.	Utilities:			
٥.	6a. Electricity, heat, natural gas	6a.	\$	300.00
	6b. Water, sewer, garbage collection	6b.	\$	125.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	0.00
10.	Personal care products and services	10.	\$	0.00
	Medical and dental expenses	11.	\$	0.00
	Transportation. Include gas, maintenance, bus or train fare.		·	
	Do not include car payments.	12.	\$	0.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.	4-	Φ.	
	15a. Life insurance	15a.		0.00
	15b. Health insurance	15b.	·	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.		467.00
	17b. Car payments for Vehicle 2	17b.	· · · · · · · · · · · · · · · · · · ·	0.00
	17c. Other. Specify:	17c.		0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sche			
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	· -	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
	20e. Homeowner's association or condominium dues	20e.	·	0.00
21.	Other: Specify:	21.	+\$	0.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	3,992.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,992.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		5,000.00
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	3,992.00
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	1,008.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

Yes.

Explain here: Once settle debt with Internal Revenue Service,, would free liens which would allow for loans to payt off support arrearage

Fill in this i	information to identify your	case:			
Debtor 1	Daniel Lawrence First Name	Castillo Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	MIDDLE DISTRICT OF	FLORIDA		
Case numb	er 8:18-bk-01224				
(if known)					Check if this is an amended filing
	Form 106Dec	1	Daletania Oal		
Decia	ration About a	in individual	Deptor's Sci	nedules	12/15
	oney or property by fraud in th. 18 U.S.C. §§ 152, 1341, 1		ruptcy case can result in	tines up to \$250,000	, or imprisonment for up to 20
Did yo	ou pay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	inkruptcy forms?	
■ N	lo				
□ Y	es. Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	penalty of perjury, I declare ey are true and correct.	that I have read the sum	mary and schedules filed	with this declaration	and
X /s/	Daniel Lawrence Castille	0	X		
Da	nniel Lawrence Castillo gnature of Debtor 1		Signature of D	Debtor 2	
Da	te March 8, 2018		Date		

Fil	I in this inform	nation to identify you	r case:							
	btor 1	Daniel Lawrence	-							
	DIOI I	First Name	Middle Name	Last Name						
1 -	btor 2	First Name	Middle Nome	Last Name						
	ouse if, filing)		Middle Name							
Un	ited States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF F	LORIDA						
		3:18-bk-01224								
(if k	nown)					Check if this is an mended filing				
\sim	ư:o:ol ⊏o:	107								
	fficial For atement		Affairs for Individ	duals Filing for B	ankruptcy	4/16				
Be info	as complete a	nd accurate as poss	ible. If two married people a	re filing together, both are	equally responsible for sup additional pages, write you					
	<u> </u>		arital Status and Where You	Lived Before						
1.	What is your	current marital statu	ıs?							
	□ Married■ Not married	ried								
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?						
	■ No□ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.									
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
3. stat					ity property state or territory co, Texas, Washington and W					
	■ No									
	_	ke sure you fill out Scl	hedule H: Your Codebtors (Of	ficial Form 106H).						
Pa	rt 2 Explain	n the Sources of You	ır Income							
4.	Fill in the tota	I amount of income yo	nployment or from operatin ou received from all jobs and a have income that you receive	all businesses, including part-		ndar years?				
	□ No									
	Yes. Fill	in the details.								
			Debtor 1		Debtor 2					
			Sources of income	Gross income	Sources of income	Gross income				
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)				
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$30,000.00	☐ Wages, commissions, bonuses, tips					
			Operating a business		☐ Operating a business					

Official Form 107

Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$0.00 ☐ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business Operating a business \$248,000.00 For the calendar year before that: □ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business Operating a business For the calendar year: \$2,751.00 □ Wages, commissions, ☐ Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income **Gross income** Gross income from Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address Dates of payment Total amount** Amount you Was this payment for ... still owe paid

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	erships of which you	ou are a genera iny managing a	I partner; corporation gent, including one fo		
	■ No□ Yes. List all payments to an insider.							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi		ments or transfer a	ny property on a	account of a de	bt that benefited an		
	_	gried by ari insider.						
	No☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
Par	t 4: Identify Legal Actions, Repossession	s and Foreclosures	Para	J J				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes.							
	■ No □ Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the	e case		
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.							
	□ No. Go to line 11.							
	Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property		Date		Value of the property		
		Explain what happened	i			р. оро. су		
	Internal Revenue Service PO Box 7346	Income tax		8/31	/2017	\$8,200.00		
	Philadelphia, PA 19101	☐ Property was reposse☐ Property was foreclos☐ Property was garnishe	ed.					
		■ Property was attached						
		— Troperty was attached	u, seizeu oi ievieu.					
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca		luding a bank or fir	nancial institutio	n, set off any a	mounts from your		
	Yes. Fill in the details.							
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was	Amount		
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an No		erty in the possessi	ion of an assigne	ee for the bene	fit of creditors, a		
	☐ Yes							

Do	List Cortain Cifts and Contribution	_			
	■ No		did you give any gifts with a total value of more t	han \$600 per person	?
	☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$60 per person Person to Whom You Gave the Gift and Address:	00	Describe the gifts	Dates you gave the gifts	Value
14.			did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses				
10.	or gambling? ■ No □ Yes. Fill in the details.		r since you filed for bankruptcy, did you lose any		
	how the loss occurred Include		ribe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers	5			
16.	consulted about seeking bankruptcy or	prepari	lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services required		rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou′	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	In Charge Debt Solutions			2/20/2018	\$15.00
	www.personalfinanceeducation.co	m			
	David L Del Vecchio Del Vecchio & Associates PA 111 Second Ave NE #1403 Saint Petersburg, FL 33701 ngunndelv@verizon.net			3/2/2018	\$1,000.00

		_	
Debtor 1	Daniel	l awrence	Castillo

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you I	or to make payments			or transfer any proper	ty to anyone who	
	No Silicia de la citation de la cita						
	Yes. Fill in the details.						
	Person Who Was Paid Address	Description and variansferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus	siness or financial affa	irs?				
	Include both outright transfers and transfers mad include gifts and transfers that you have already No			ecurity interes	st or mortgage on your	property). Do not	
	Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and value of property transferred payments received or debts paid in exchange				Date transfer was made	
	Person's relationship to you			para in ox	ionango		
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No						
	Yes. Fill in the details.						
	Name of trust	Description and va	Date Transfer was made				
Par	List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and Stor	rage Units			
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accoun	ts; certificates o	of deposit; sl			
	Yes. Fill in the details.		_				
		_ast 4 digits of account number	Type of accour instrument	cle me	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed for	bankruptcy, any	/ safe deposi	it box or other deposit	tory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, St State and ZIP Code)		Describe the contents		Do you still have it?	
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before y	ou filed for bankruptc	y?	
	■ No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe the	contents	Do you still have it?	

Debtor 1 Daniel Lawrence Castillo Case number (if known) 8:18-bk-01224

Par	t 9:	Identify Property You Hold or Control for	Someone Else					
23.	23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.							
		No						
		Yes. Fill in the details.	Mile and in the property O	D-	aniha tha muanantu	Value		
		vner's Name Idress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value		
Par	t 10	Give Details About Environmental Inform	ation					
For	the	purpose of Part 10, the following definitions	apply:					
	tox	vironmental law means any federal, state, or ic substances, wastes, or material into the a ulations controlling the cleanup of these su	ir, land, soil, surface water, ground	_	•			
		e means any location, facility, or property as own, operate, or utilize it, including disposal	•	law,	whether you now own, operate,	or utilize it or used		
		zardous material means anything an environ ardous material, pollutant, contaminant, or		s wa	ste, hazardous substance, toxic	substance,		
Rep	ort a	all notices, releases, and proceedings that ye	ou know about, regardless of wher	n the	ey occurred.			
24.	Has	s any governmental unit notified you that yo	u may be liable or potentially liable	unc	der or in violation of an environm	ental law?		
		No Yes. Fill in the details.						
		me of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material?							
		No Yes. Fill in the details.						
		me of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice		
26.	Hav	ve you been a party in any judicial or admini	strative proceeding under any envi	ironi	mental law? Include settlements	and orders.		
		No Yes. Fill in the details.						
	Ca	se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case		
Par	t 11	Give Details About Your Business or Con	nections to Any Business					
27.	Wit	hin 4 years before you filed for bankruptcy,	did you own a business or have ar	ıy of	the following connections to an	y business?		
		■ A sole proprietor or self-employed in a	trade, profession, or other activity,	eith	ner full-time or part-time			
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership	••		•			
			tive of a corporation					
	☐ An owner of at least 5% of the voting or equity securities of a corporation							

Official Form 107

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Case number (if known) 8:18-bk-01224

	☐ No. None of the above applies. Go to F	Part 12.		
	Yes. Check all that apply above and fill	in the details below for each business.		
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business		Identification number clude Social Security number or ITIN.
	(Number, Street, City, State and 21F Code)	Name of accountant or bookkeeper	Dates bus	siness existed
	Daniel L Castillo 3900 No Boulevard	Legal Field	EIN:	59-3096617
	Tampa, FL 33603		From-To	10/17/1991 - present
	■ No □ Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Par	t 12: Sign Below			
are t with 18 U	ve read the answers on this Statement of Fir true and correct. I understand that making a a bankruptcy case can result in fines up to I.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, or ok	otaining mo	oney or property by fraud in connection
	niel Lawrence Castillo	Signature of Debtor 2		
Sig	nature of Debtor 1			
Dat	e March 8, 2018	Date		
Did y ■ N □ Y	.•	ent of Financial Affairs for Individuals Filing	g for Bankru	uptcy (Official Form 107)?
Did :	you pay or agree to pay someone who is no	t an attorney to help you fill out bankruptcy	forms?	
ПΥ	es. Name of Person Attach the Bankru	ptcy Petition Preparer's Notice, Declaration, a	nd Signature	e (Official Form 119).

Fill in this information to identify your case:					
Debtor 1	Daniel Lawrence Castillo				
Debtor 2 (Spouse, if filing)					
United States E	Bankruptcy Court for the: Middle District of Florida				
Case number (if known)	8:18-bk-01224				

Check as directed in lines 17 and 21:							
	According to the calculations required by this Statement:						
1. Disposable income is not determined u11 U.S.C. § 1325(b)(3).							
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						
☐ Check if this is an amended filing							

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	1:	Calculate Your Average Monthly Income							
1.	1. What is your marital and filing status? Check one only.								
	■ No	ot married. Fill out Column A, lines 2-11.							
	□ Ma	arried. Fill out both Columns A and B, lines 2-11.							
10 the	1(10A) e 6 moi	e average monthly income that you received from all . For example, if you are filing on September 15, the 6-nths, add the income for all 6 months and divide the tota own the same rental property, put the income from that	month per al by 6. Fil	riod would Il in the re	l be March 1 throusult. Do not includ	igh Au de any	igust 31. If the amo income amount m	ount of your monthly incom ore than once. For examp	ne varied during le, if both
						Colu Debt	mn A t or 1	Column B Debtor 2 or non-filing spouse	
		gross wages, salary, tips, bonuses, overtime Il deductions).	, and co	mmissi	ons (before all	\$	10,000.00	\$	
3.		ony and maintenance payments. Do not include nn B is filled in.	e payme	nts from	a spouse if	\$	0.00	\$	
	4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.				\$	0.00	\$		
		ncome from operating a business, ssion, or farm	Debtor	-					
	Gross	s receipts (before all deductions)	\$_	0.00					
	Ordin	ary and necessary operating expenses	- \$	0.00				_	
	Net m	nonthly income from a business, profession, or fa	rm \$ _	0.00	Copy here ->	\$	0.00	\$	
6.	Net ir	ncome from rental and other real property	Debtor						
	Gross	s receipts (before all deductions)	\$_	0.00					
	Ordin	ary and necessary operating expenses	- \$ _	0.00		_	0.55	•	
	Net m	contbly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

				Column A Debtor 1		Column B Debtor 2 or non-filing s	
7.	Interest, dividends, and royalties			\$	0.00	\$	
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the an the Social Security Act. Instead, list it here:	nount received was a t	oenefit under				
	For you	\$	0.00				
	For your spouse	\$					
	Pension or retirement income. Do not include ar benefit under the Social Security Act.	ny amount received tha	at was a	\$	0.00	\$	
	Income from all other sources not listed above Do not include any benefits received under the So received as a victim of a war crime, a crime agains domestic terrorism. If necessary, list other sources total below.	cial Security Act or pay st humanity, or internal	yments tional or				
				\$	0.00	\$	
				\$	0.00	\$	
	Total amounts from separate pages, if an	y.	+	\$	0.00	\$	
	Calculate your total average monthly income. A each column. Then add the total for Column A to t		for \$1	0,000.00	+ \$		\$10,000.00
12. 13.	Copy your total average monthly income from Calculate the marital adjustment. Check one:	line 11.					\$10,000.00
	You are not married. Fill in 0 below.						
	☐ You are married and your spouse is filing with	n you. Fill in 0 below.					
	☐ You are married and your spouse is not filing	with you.					
	Fill in the amount of the income listed in line dependents, such as payment of the spouse'						
	Below, specify the basis for excluding this incadjustments on a separate page.	come and the amount of	of income dev	oted to each	n purpose.	If necessary,	list additional
	If this adjustment does not apply, enter 0 belo	ow.	•				
			\$		_		
			+\$				
			:		_		
	Total		. \$	0.0	0Co	py here=>	0.00
14.	Your current monthly income. Subtract line 13	from line 12.					\$10,000.00
15.	Calculate your current monthly income for the	e year. Follow these s	teps:				
	15a. Copy line 14 here=>						\$10,000.00
	Multiply line 15a by 12 (the number of mor						x 12
	15b. The result is your current monthly income	for the year for this par	t of the form.				\$ 120,000.00

Daniel Lawrence Castillo

Debtor 1

Debt	or 1	Daniel Lawrence Castillo		Case number (if known)	8:18-bk-01224	
16	. Cal	culate the median family income that applies to yo	Du. Follow these steps:			
	16a	Fill in the state in which you live.	FL			
	4.01	Ellis the combine of a contribution of the con				
		Fill in the number of people in your household.	1		. 45.7	03.00
	160	Fill in the median family income for your state and s To find a list of applicable median income amounts,		k specified in the separate	\$ <u>43,7</u>	03.00
		instructions for this form. This list may also be available				
17	. Hov	do the lines compare?				
	17a	Line 15b is less than or equal to line 16c. Or 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO				ned under
	17b	■ Line 15b is more than line 16c. On the top o 1325(b)(3). Go to Part 3 and fill out Calcul your current monthly income from line 14 ab	lation of Your Disposa			
Par	t 3:	Calculate Your Commitment Period Under 11 L	J.S.C. § 1325(b)(4)			
18.	Cop	y your total average monthly income from line 11	•		\$10	0,000.00
19.	con	uct the marital adjustment if it applies. If you are rend that calculating the commitment period under 11 use's income, copy the amount from line 13.	narried, your spouse is U.S.C. § 1325(b)(4) a	s not filing with you, and you llows you to deduct part of yo	our	
		If the marital adjustment does not apply, fill in 0 on li	ine 19a.		-\$	0.00
	19b	Subtract line 19a from line 18.			\$10,0	00.00
20.	Cal	ulate your current monthly income for the year.	Follow these steps:			
	20a	Copy line 19b			\$10,0	00.00
		Multiply by 12 (the number of months in a year).			x 12	
	20b	The result is your current monthly income for the ye	ar for this part of the fo	rm	\$ 120,0	00.00
	20c	Copy the median family income for your state and s	ize of household from I	ine 16c	\$ 45,7	03.00
	21.	How do the lines compare?				
		Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	e ordered by the court,	on the top of page 1 of this f	orm, check box 3, The con	nmitment
		Line 20b is more than or equal to line 20c. Unlocommitment period is 5 years. Go to Part 4.	ess otherwise ordered	by the court, on the top of pa	ge 1 of this form, check bo	x 4, <i>The</i>
Par	t 4:	Sign Below				
	By s	igning here, under penalty of perjury I declare that th	e information on this st	tatement and in any attachme	ents is true and correct.	
,	(le	Daniel Lawrence Castillo				
•		niel Lawrence Castillo				
		nature of Debtor 1				
	Date	March 8, 2018 MM / DD / YYYY				
	If yo	u checked 17a, do NOT fill out or file Form 122C-2.				
	•	u checked 17b, fill out Form 122C-2 and file it with th	is form. On line 39 of t	hat form, copy your current n	nonthly income from line 14	above.

Fill in th	is information to identify your case:		
Debtor 1	Daniel Lawrence Castillo		
Debtor 2 (Spouse	e , if filing)		
United S	states Bankruptcy Court for the: Middle District of Florida		
Case nu (if knowr		☐ Check if	f this is an amended filing
	Form 122C-2 oter 13 Calculation of Your Disposab	le Income	04/10
	t this form, you will need your completed copy of <i>Chapter 13 S</i>	tatement of Your Current Monthly In	ncome and Calculation of
space is	mplete and accurate as possible. If two married people are filin needed, attach a separate sheet to this form, Include the line nal pages, write your name and case number (if known). Calculate Your Deductions from Your Income		
the qu	nternal Revenue Service (IRS) issues National and Local Standauestions in lines 6-15. To find the IRS standards, go online usin mation may also be available at the bankruptcy clerk's office.		
expen	ct the expense amounts set out in lines 6-15 regardless of your actures if they are higher than the standards. Do not include any operation, and do not deduct any amounts that you subtracted from your sp	ting expenses that you subtracted from	income in lines 5 and 6 of Form
If your	r expenses differ from month to month, enter the average expense.		
Note:	Line numbers 1-4 are not used in this form. These numbers apply to	o information required by a similar form	used in chapter 7 cases.
5. 1	The number of people used in determining your deductions from	m income	
p	Fill in the number of people who could be claimed as exemptions on olus the number of any additional dependents whom you support. The he number of people in your household.		1
Natio	nal Standards You must use the IRS National Standards	to answer the questions in lines 6-7.	
	Food, clothing, and other items: Using the number of people you of Standards, fill in the dollar amount for food, clothing, and other items		\$639.00
	Out-of-pocket health care allowance: Using the number of people he dollar amount for out-of-pocket health care. The number of peop		

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Official Form 22C-2

Debtor 1	Daniel Lawrence Castillo		Case number (<i>if known</i>) 8:18-bk-01224
Peopl	e who are under 65 years of age		
7	a. Out-of-pocket health care allowance per person	\$ 49	
7	b. Number of people who are under 65	X 1	
7	c. Subtotal. Multiply line 7a by line 7b.	\$ 49.00	Copy here=> \$ 49.00
Peopl	e who are 65 years of age or older		
7	d. Out-of-pocket health care allowance per person	\$ 117	
	'e. Number of people who are 65 or older	x 0	
	f. Subtotal. Multiply line 7d by line 7e.	\$ 0.00	Copy here=> \$0.00
7	'g. Total. Add line 7c and line 7f	\$	49.00 Copy total here=> \$ 49.00
Local	Standards Vou must use the IDS Level Standards to	a answer the questions in	lines 9 15
Based	Standards You must use the IRS Local Standards to on information from the IRS, the U.S. Trustee Pro	•	
_	uptcy purposes into two parts:		
_	using and utilities - Insurance and operating exper	ises	
	using and utilities - Mortgage or rent expenses swer the questions in lines 8-9, use the U.S. Truste	a Dragger about To find	the short as culing using the link questied in the
separ 8. H	ate instructions for this form. This chart may also be to singular that may also be to singular and utilities - Insurance and operating expenses the dollar amount listed for your county for insurance	oe available at the bankruenses: Using the number of	uptcy clerk's office.
	lousing and utilities - Mortgage or rent expenses:	and of evening or heaven	
9	la. Using the number of people you entered in line 5, listed for your county for mortgage or rent expense		\$1,015.00
g	b. Total average monthly payment for all mortgages a	and other debts secured by	y your home.
	To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.		
	Name of the creditor	Average monthly payment	
	-NONE-	\$\$	_
	9b. Total average monthly paymen	nt \$0.00	Copy here=> -\$ O.00 Repeat this amount on line 33a.
9	c. Net mortgage or rent expense.		
	Subtract line 9b (total average monthly payment) for rent expense). If this number is less than \$0, en	` 55	\$1,015.00 Copy here=> \$1,015.00
	f you claim that the U.S. Trustee Program's division iffects the calculation of your monthly expenses, fill Explain why:		

11.	Local transportation expenses: Check the number of vehic	cles for which you claim	an ownership	o or operating	expense.	
	☐ 0. Go to line 14.					
	☐ 1. Go to line 12.					
	■ 2 or more. Go to line 12.					
12.	Vehicle operation expense: Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for					430.00
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.					
Ve	hicle 1 Describe Vehicle 1: 2016 Toyota Camry 700	00 miles				
13a	Ownership or leasing costs using IRS Local Standard		\$	485.00		
13b.	Average monthly payment for all debts secured by Vehicle 1					
	Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 months bankruptcy. Then divide by 60.		at			
	Name of each creditor for Vehicle 1	Average monthly payment				
	Wells Fargo	\$ 467.72				
	Total Average Monthly Payment	\$	Copy here => -	\$ 467.	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0	, enter \$0	\$	17.28	Copy net Vehicle 1 expense here => \$	17.28
Ve	hicle 2 Describe Vehicle 2:					
13d	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13e	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not include costs fo	or			
	Name of each creditor for Vehicle 2	Average monthly payment				
	-NONE-	\$				
	Total average monthly payment	\$	Copy here => -\$	0.00	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0	, enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of				the \$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Trans</i>	hat you believe is the a				0.00

Daniel Lawrence Castillo

Debtor 1

Debtor 1 Daniel Lawrence Castillo Case number (if known) 8:18-bk-01224

Oth	er Necessary Expenses	In addition to the expense of the following IRS categories		listed above	, you are allowed your monthly expense	s for	
16.	. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.						
17.	7. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement						
	contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.						0.00
18.	filing together, include payr	ments that you make for your or life insurance on your depe	spouse's	term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.	 Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 						3,000.00
20.	Education: The total mont	hly amount that you pay for e	education	that is either	required:		
	_		t child if no	o public educ	ation is available for similar services.	\$	0.00
21.		nly amount that you pay for cl or any elementary or seconda			sitting, daycare, nursery, and preschool.	\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.						0.00
23.	Optional telephone and to for you and your dependen phone service, to the exten income, if it is not reimburs Do not include payments for expenses, such as those re	+\$	0.00				
24.	Add all of the expenses a Add lines 6 through 23.	llowed under the IRS expe	nse allow	ances.		\$	7,597.28
Add	litional Expense Deduction	These are additional d					
25.					ises. The monthly expenses for health ly necessary for yourself, your spouse, or	or	
	Health insurance		\$	0.00			
	Disability insurance		\$	0.00			
	Health savings account	+	\$	0.00	_		
	Total		\$	0.00	Copy total here=>	\$	0.00
	Do you actually spend this No. How much do y				L		
	Yes		\$				
26.	continue to pay for the reas	sonable and necessary care	and suppo o is unabl	ort of an elder le to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.					nses that you incur to maintain the es Act or other federal laws that apply.		
	By law, the court must keep	the nature of these expense	es confide	ential.		\$	0.00

btor 1	Daniel Lawrence Castillo		Case number (if known	own) 8:	18-bk-0	1224	
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insur	ance and operat	ting exper	ises on		
	If you believe that you have home energy of 8, then fill in the excess amount of home er		costs included i	n expense	es on lin	ie	
	You must give your case trustee document amount claimed is reasonable and necessa		nust show that the	e addition	al	\$_	0.0
	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The more pendent children who are younger than 1	nthly expenses (in the second to a second	not more t ttend a pri	than vate or		
	You must give your case trustee document claimed is reasonable and necessary and r		nust explain why	the amou	nt		
	* Subject to adjustment on 4/01/19, and evo	ery 3 years after that for cases begun on	or after the date	of adjustr	nent.	\$_	0.0
	Additional food and clothing expense. Thigher than the combined food and clothing than 5% of the food and clothing allowance	allowances in the IRS National Standard					
	To find a chart showing the maximum additinstructions for this form. This chart may also			eparate			
	You must show that the additional amount	claimed is reasonable and necessary.				\$_	0.0
	Continuing charitable contributions. The instruments to a religious or charitable organizations.		ute in the form of	cash or fi	nancial		
	Do not include any amount more than 15%	of your gross monthly income.				\$_	0.0
							0.00
	Add all of the additional expense deducted Add lines 25 through 31.	ions.				\$_	0.00
Dedu	ictions for Debt Payment						
lo	for debts that are secured by an interest pans, and other secured debt, fill in lines to calculate the total average monthly paym	33a through 33e.					
	reditor in the 60 months after you file for ba		ly due to caon se	curcu			
	Mortgages on your home					Avera	ige monthly
33a.	Copy line 9b here				=>	\$	0.00
	Loans on your first two vehicles					· —	
33b.	Ones Para 40h hama				=>	\$	467.72
33c.						\$	0.00
						Ψ	0.00
33d. Name	List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt		Does pay	axes		
				or insura	nce?		
				□ No			
	-NONE-			☐ Yes		\$	
				□ No			
				☐ Yes		\$	
				□ No			
				☐ Yes	+	\$	
					\neg	· _	
					Cop		
			1	467.72	total	I I	

ebtor 1	Dani	iel Lawrence Castillo			Cas	e number (if known)	8:18-bk-0	1224	
		debts that you listed in lir property necessary for yo				. ,			
	No.	Go to line 35.							
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill it	ossession of your property						
Name	of the	creditor	Identify property that see	cures the deb	t	Total cure amoun		Monthly c	ure
-NO	NE-				\$		÷ 60 = \$	·	
							Сору		
					Total	\$0	.00 total	=> \$	0.00
		owe any priority claims - s				nat			
aro	e past No.	due as of the filing date of Go to line 36.	r your bankruptcy case?	' 11 U.S.C. §	507.				
_		Fill in the total amount of a	all of these priority claims.	Do not includ	e current or				
		ongoing priority claims, su	ch as those you listed in li	ne 19.					
		Total amount of all past-o	due priority claims			\$0	. 00 ÷ 60	\$	0.00
36. P r	ojecte	d monthly Chapter 13 pla	n payment			\$			
Of the To	fice of Exec find a li	nultiplier for your district as the United States Courts (for utive Office for United State ist of district multipliers that incl nstructions for this form. This lis	or districts in Alabama and s Trustees (for all other dis udes your district, go online us	North Caroli stricts). Sing the link sp	na) or by	х			
Av	erage	monthly administrative expe	ense			\$	Copy to here=>		
		of the deductions for debes 33e through 36.	t payment.					\$	467.72
Total	Deduc	tions from Income							
38. Ac	dd all d	of the allowed deductions							
C e	copy lir expense	ne 24, All of the expenses a e allowances	llowed under IRS	\$	7,597.28	<u>} </u>			
		ne 32, All of the additional e			0.00	<u>) </u>			
C	opy lir	ne 37, All of the deductions	for debt payment	+\$	467.72	<u>!</u>			
т	otal de	eductions		\$	8.065.00	Copy total he	re=>	\$	8,065.00

Debtor 1	Dan	iei Lawrei	nce Castillo			ase nu	mber (if known) 8	:18-DK-U1224	
Part 2:	De	termine Yo	ur Disposable Income Under 1	1 U.S.C. § 132	5(b)(2)				
			rrent monthly income from line Current Monthly Income and C			d.		\$	10,000.00
d re	hildren lisability eceived	The month payments fin accordar	bly necessary income you rece nly average of any child support p for a dependent child, reported in nce with applicable nonbankrupto pended for such child.	payments, foste Part I of Form	er care payments, or 122C-1, that you		\$	0.00	
e ir	mploye n 11 U.S	r withheld fr 5.C. § 541(b	retirement deductions. The mor om wages as contributions for qu p)(7) plus all required repayments C. § 362(b)(19).	ıalified retireme	ent plans, as specific		\$	0.00	
42. T	otal of	all deduction	ons allowed under 11 U.S.C. §	707(b)(2)(A). C	opy line 38 here	=>	\$ 8,06	5.00	
e tl	xpense neir exp	s and you h enses. You	cial circumstances. If special circumstances. If special circurative, do must give your case trustee a dedocumentation for the expenses.	escribe the spe	cial circumstances a	and			
Desc	ribe the	e special c	ircumstances		Amount of ex	pense			
					\$		_		
					\$		_		
					\$				
							ору		
				Total	\$		ere=> \$	0.00	
				L				Comu	
44. T	otal ad	justments.	Add lines 40 through 43.		=>	\$_	8,065.00	Copy here=> -\$	8,065.00
45. C	Calculat	e your mor	nthly disposable income under	§ 1325(b)(2).	Subtract line 44 fron	n line	39.	\$	1,935.00
Part 3:	Ch	ange in Inc	come or Expenses						
h ti y	ave cha me you ou filed	anged or are r case will b your petitio	or expenses. If the income in Formation is a circumstance open, fill in the information below, check 122C-1 in the first column in when the increase occurred, a	the date you filow. For exampler, enter line 2	ed your bankruptcy e, if the wages repo in the second colun	petitic rted ir nn, ex	n and during the creased after		
Form		Line	Reason for change		Date of chang	ge	Increase or decrease?	Amount of ch	ange
☐ 12 ☐ 12 ☐ 12 ☐ 12	22C-2 22C-1 22C-2						☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase	\$	
□ 12 □ 12							☐ Decrease ☐ Increase	\$	
							☐ Decrease	\$	

Case 8:18-bk-01224-CPM Doc 18 Filed 03/08/18 Page 37 of 43

Debtor 1	Daniel Lawrence Castillo	Case number (if known)	8:18-bk-01224
Part 4:	Sign Below		
X <u>/</u>	y signing here, under penalty of perjury you declare that the inform (s/ Daniel Lawrence Castillo Daniel Lawrence Castillo	ation on this statement and in any att	achments is true and correct.
	Signature of Debtor 1 March 8, 2018		
_	MM / DD / YYYY		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Middle District of Florida

In re	Daniel Lawrence Castillo		Case No.	8:18-bk-01224
		Debtor(s)	Chapter	13
	VERIFICATION O	· · · · · · · · · · · · · · · · · · ·	•	
The abo	ove-named Debtor hereby verifies that the attached list of	creditors is true and correct	et to the best o	of his/her knowledge.

/s/ Daniel Lawrence Castillo

Daniel Lawrence Castillo Signature of Debtor

Date: March 8, 2018

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Middle District of Florida

In re	Daniel Lawrence Castillo		Case No.	8:18-bk-01224
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR DE	BTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of of the debtor (s).	of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	3,600.00
	Prior to the filing of this statement I have received		\$	1,000.00
	Balance Due		\$	2,600.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	☐ Debtor ☐ Other (specify): Through	plan		
4.	■ I have not agreed to share the above-disclosed compens	sation with any other person	unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensatio copy of the agreement, together with a list of the names			
5.	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspec	ts of the bankruptcy ca	ase, including:
1	a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statemed c. Representation of the debtor at the meeting of creditors at d. Representation of the debtor in adversary proceedings at e. [Other provisions as needed] Negotiations with secured creditors to redirect reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house	ent of affairs and plan which and confirmation hearing, a nd other contested bankrupt uce to market value; ex as needed; preparatior	h may be required; nd any adjourned hear cy matters; emption planning;	ings thereof; preparation and filing of
6.	By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any disch any other adversary proceeding.	pes not include the following argeability actions, jud	g service: icial lien avoidance	es, relief from stay actions or
		CERTIFICATION		
	I certify that the foregoing is a complete statement of any agankruptcy proceeding.	greement or arrangement fo	r payment to me for re	presentation of the debtor(s) in
N	larch 8, 2018		/ecchio, Esquire FE	
D	Oate Control of the C	Signature of Attornation Signature of Attornation & Association & Associ		0940607
		Plaza Tower 111 2nd Avenue	NE. # 1403	
		St. Petersburg, F	L 33701	
		727-896-6210 Fa ngunndelv@veri		
		Name of law firm	-	